BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 ATTORNEY DOCKET NO. 4423-0127 PUS

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	TRANSMISSION DEVICE OF LAMINATING MACHINE					
· · · · · · · · · · · · · · · · · · ·	the specifications of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:					
Fill in Appropriate Information - For Use Without Specification Attached:	the specification was filed on			as		
	United States Application Number	1				
	and amended on	(if applicable); and/or				
	the specification was filed on	as PCT				
	International Application Number		; and was			
	amended on		(if applicable)			
Insert Priority	I hereby state that I have reviewed and to by any amendment referred to above. I acknowledge the duty to disclose info §1.56. I do not know and do not believe the extereof, or patented or described in any priprior to this application, that the same was rapplication, that the invention has not bee application in any country foreign to the Unmore than twelve months (six months for don this invention has been filed in any courepresentatives or assigns, except as follow. I hereby claim foreign priority benefit or inventor's certificate listed below and has a filing date before that of the application of Prior Foreign Application(s)	rmation which is material same was ever known on the publication in any cont in public use or on same patented or made the hited States of America of esigns) prior to this application for the Unit of States of States of the Unit of States o	used in the United States of country before my or our in the United States of Ar subject of an inventor's cer on an application filed by me lication, and that no applicated States of America prior States Code, §119 (a)-(d) of any foreign application for	f America before my or or ovention thereof or more the nerica more than one year a tificate issued before the or my legal representative tion for patent or inventor's to this application by me of any foreign application(s patent or inventor's certification for inventor's certi	Regulations, ar invention an one year prior to this date of this s or assigns s certificate or my legal	
Information:						
(if appropriate)	(Number)	(Country)	(Month / Day / Year F		No	
	(Number)	(Country)	(Month / Day / Year F	Filed) Yes	No	
						
	(Number)	(Country)	(Month / Day / Year F	Filed) Yes	No	
	(Number)	(Country)	(Month / Day / Year F	103	No	
Insert Provisional Application(s):	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.					
	(Application Number)			(Filing Date)		
	(Application Number)			(Filing Date)		
	All Foreign Applications, if any, for any P the Filing Date of this Application:	atent or Inventor's Certi	ficate Filed more than 12 m	onths (6 months for desig	ns) Prior to	
Insert Requested Information: (if appropriate)	Country	Application Number		Date of Filing (Month	Date of Filing (Month / Day / Year)	
Insert Prior U.S.	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.					
Application(s):	(Application Number)	(Filing Date)	(Stat	us - patented, pending, abandon	patented, pending, abandoned)	
Page 1 of 2	(Application Number)	(Filing Date)	· (Stat	(Status - patented, pending, abandoned)		

I hereby appoint the practitioners at CUSTOMER-NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 02292 P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

YOU MUST COMPLETE THE FOLLOWING: Pull Name of First or GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE DATE Chin-Tsung HSIAO m is Sign Residence (City, State & Courter) Taiwan(R.O.C.) Taipei Hsien, Taiwan(R.O.C.) MAILING ADDRESS (Complete Street Address including City, State & Country) No. 9, Wu-Chun 6 Rd., Wu-Ku Ind. Park, Taipei Hsien, Taiwan (R.O.C.) GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE -DATE: Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE DATE Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Pull Name of Fourth GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE DATE: Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Il Name of First GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE DATE. Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Page 2 of 2 (Revised 01/02) DATE OF SIGNATURE